



RESORT PROPERTIES OF THE PACIFIC

To: _____ Escrow Officer: _____
 Tel: _____ Cell: _____ Assistant: _____
 Fax: _____ Email: _____ Escrow # _____

Please set up and process an escrow on behalf of the Buyer and Seller as outlined in the Purchase Contract dated _____ and accepted _____

Funds representing the Buyer's deposit in the amount of \$ _____ will be transmitted via _____
 In the event the escrow is not consummated, you are to secure further instructions from the undersigned before disbursement of this deposit.

SELLER(S):		
Address: _____		
City: _____	State: _____	ZIP _____
Tel _____		
Fax _____		
Cell: _____		
Email: _____		

BUYER(S):		
Address: _____		
City: _____	State: _____	ZIP _____
Tel _____		
Fax _____		
Cell: _____		
Email: _____		

SELLER'S BROKER:		
AGENT:		
Address: _____		
Tel _____		
Fax _____		
Cell: _____		
Email: _____		

BUYER'S BROKER:		
AGENT:		
Address: _____		
Tel _____		
FAX _____		
Cell: _____		
Email: _____		

PROPERTY INFORMATION

SALE INFORMATION

TMK: <input type="checkbox"/> Res <input type="checkbox"/> Land <input type="checkbox"/> CPR <input type="checkbox"/> Condo <input type="checkbox"/> LH or <input type="checkbox"/> FS	PURCHASE PRICE: FINANCED BY: _____ LOAN OFFICER: _____ Tel: _____ Fax: _____
Address: _____	LOAN TYPE: <input type="checkbox"/> Conv. <input type="checkbox"/> Constr. <input type="checkbox"/> FHA or VA
City: _____ State: _____ Zip: _____	TO CLOSE BY:
For entry Contact::	

Exchange Accommodator :
Commission Instructions: Please make check for \$ _____ payable to RESORT PROPERTIES OF THE PACIFIC. GET YES ___ NO ___ Commission to cooperating broker \$ _____ GET YES ___ NO ___

Referral Instructions:

Broker's Signature _____